

**THE MINUTES OF THE MEETING  
OF THE PARTNERSHIPS SCRUTINY COMMITTEE  
HELD ON TUESDAY 13 SEPTEMBER 2005**

Present: Councillor R Burnip (Chair)  
Councillors P J Campbell, B Joyce,  
T Longstaff, C Patching, W R Peardon,  
Mrs B A Sloan and R G Wharrier

Also Present: Councillor D Myers – Executive Member for  
E-Government and Scrutiny Liaison

**1 APOLOGIES FOR ABSENCE**

Apologies for absence were submitted on behalf of Councillors J Haggan, Mrs S Mason and S Gwilym.

**2 THE MINUTES OF THE LAST MEETING** held on 19 July 2005, a copy of which had been circulated to each Member, were confirmed.

**3 THE MINUTES OF THE MEETING OF THE EXECUTIVE** held on 30 August 2005, a copy of which had been circulated to each Member, were submitted.

**RESOLVED** that the information contained within the Minutes, be noted.

**4 PUBLIC QUESTION AND ANSWER SESSION**

There were no members of the public present.

**5 THE DARZI REVIEW OF ACUTE HEALTH SERVICES NORTH AND SOUTH OF THE TEES**

Consideration was given to the report of the Scrutiny Support Manager the purpose of which was to advise Members of the report of Professor Ara Darzi reviewing Acute Health Services North and South of the Tees and to invite the Partnerships Scrutiny Committee to approve terms of reference for a Scrutiny Review of the implications of the report for residents of the district in terms of access/transportation to NHS services, a copy of which had been circulated to each Member.

The County Durham and Tees Valley Strategy Health Authority received the report of Professor Ara Darzi's review which included a number of key recommendations which would change the way in which some NHS services were provided.

The proposals would have a major impact upon some of the residents of Easington District and the District Council wished to ensure that the recommendations would not have an adverse effect on some of the most vulnerable members of the community.

The Terms of Reference for an investigation had been drafted and were outlined in the report.

**RESOLVED** that:-

- (i) the Partnerships Scrutiny Committee agree to undertake a review of the implications of the Darzi review report upon the access to NHS services by residents;

(ii) the Terms of Reference for the review as detailed in the report be agreed.

## **6 THE DARZI REPORT**

The Chair explained that Roger Bolas, Chief Executive of Easington PCT was in attendance to discuss the Darzi report and the implications for residents of the district in terms of access/transportation to NHS services.

R Bolas explained that people who lived in a town could access hospital services by public transport within an hour with no more than one change. In rural communities, attending early appointments, evening and weekend visiting was a particular problem. There had been some success in obtaining greater responsive transport through the Rural Bus Challenge although the funding was time limited for three years and it was not clear the level of the success required to attract further central funding.

It was explained that the Primary Care Trust had a difficult time in making use of the opportunity provided by the Urban Bus Challenge funding. The bid had been subject to tight timescales and it was hoped to provide a half hour shuttle bus between the University Hospital of Hartlepool and the University Hospital of North Tees. This was a very difficult goal to reach as the services would be more expensive than the funding available and was still being worked upon. It was hoped that one bus service would be extended but this was still uncertain.

Mr Bolas explained that a workshop had been held approximately two weeks ago which included representatives from Easington, Middlesbrough, Hartlepool and Redcar. All Primary Care Trusts were very interested in trying to reduce services centrally and provide services closer to where people lived. The question as to why bus passes did not go beyond district boundaries was raised. It was also noted that the bus fare was very difficult for someone on benefits to find even when this could be reclaimed.

It had been suggested that when booking appointments there could be a travel voucher issued for the journey but the voucher would not have a market value and would be specific to that journey. R Bolas explained it could be a worthwhile scheme and would be investigated further. Of the people who attended hospital 70% arrived by car but the extent to which those people were taken by a friend or neighbour was not known.

R Bolas advised that following the opening of the Urgent Care Centre in Peterlee the number of attendances by residents of Easington District at the University Hospital of Hartlepool A & E department had decreased from 1,200 in August 2004 to 800 in August 2005. It was very encouraging that people were using local services.

It was explained that a new choice initiative called 'Choose and Book' was currently being investigated. This would give the public an opportunity of choosing from four or five different hospitals to have their treatment. As well as choice, patients would be given timely and up to date information on travel. This initiative was still theoretical and was not operating anywhere in England and until a pilot was carried out any problems would not be known. Real time information systems would be installed in hospital concourses and information would be provided to the patient at the time they received their appointment.

To summarise, Mr Bolas explained that there needed to be a single point of access for information and make sure there was a link with the booking process. He was aware of the issues surrounding visiting in the evening and weekends and needed more understanding of the patterns of transport. He explained that he had had an

**Partnerships Scrutiny Committee – 13 September 2005**

offer from the Tees Transport Group for information they had already collated but changes to transport happened very quickly and there was a danger that this could be now out of date. It was explained that the NHS knew that transport was an issue and funding had been set aside to deal with this problem. The Darzi report was providing a spring board for making change happen. Inaccessible services were services denied to patients.

Members commented that it was pleasing to note that transport was being addressed although there needed to be sustainability.

A Member commented that if a patient was to receive an examination and had a lengthy travel this could affect their health prior to any examination taking place. R Bolas explained that he would give some thought to this in future. He added that nationally there has been a report on the effectiveness of the ambulance service and it was likely by 2006 that there would be one ambulance service covering the whole of the North East region.

A Member asked if Mr Bolas had met with any of the reviewers of the Darzi report. Mr Bolas explained that he had been involved in the process and had met Professor Darzi several times. He explained that the public consultation would be available from 23 September 2005 and the overall document made reference to transport and the work currently being carried out.

A Member commented that part of the difficulty was that there was a unique set of circumstances in Easington and all hospitals were accessed via a car or public transport. Public transport should be affordable and available. If this was not the case then they were going in the opposite direction of Centres of Clinical Excellence and the 'Choose and Book' initiative. It was very important that the NHS resourced these issues. Missed appointments also needed to be quantified and there would be a more effective and efficient service by improving attendances. With regard to bus passes, boundary issues and voucher schemes, the Council needed to know what timescales the PCT were working towards and when these would be in place.

R Bolas explained that the work would be considered in this year's round of budgetary allocations in April 2006. Organisational changes were ongoing and he could make a clear commitment that this would be picked up by the successor organisation.

A Member explained that if the Easington PCT could have its schemes in place before the reorganisation then it would be more difficult for the successor organisation to remove them. R Bolas revised his commitment forward to January 2006 for an implementation of transport schemes.

The Chair thanked Roger Bolas for his attendance.

**RESOLVED** that the information given, be noted.

CERTIFIED TRUE RECORD

CHAIR .....

Date .....